### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

#### STATEMENT OF ECONOMIC INTERESTS

**COVER PAGE** 



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Please type or print in ink.

NA	ME OF FILER	(LAST)		(FIRST)	CITY (MIÈPLE) SOEPARTIME!
		Garcia	Raquel		MôţicaoR -8 Pil 1:00
1.	Office, Agend	cy, or Court			
	Agency Name City of Baldw	in Park			
	Division, Board, D	epartment, District, if applicable		Your Position	
	City Council			Councilmer	mber
	► If filing for mult	tiple positions, list below or on an	attachment.		
	Agency: <u>56</u>	VCOG/Sanitati	ion Dist/	ICA Position:	Board member
2.	Jurisdiction	of Office (Check at least on	box)		
	State			☐ Judge or Cou	rt Commissioner (Statewide Jurisdiction)
	☐ Multi-County _			County of	
	City of Bald	win Park		Other	
3.	Type of State	ement (Check at least one bo	x)		
	Dec	e period covered is January 1, 20 cember 31, 2012.	2, through	Leaving Offi (Check one)	ice: Date Left
		e period covered is/ cember 31, 2012.	through, through	The period leaving of the seriod leaving le	d covered is January 1, 2012, through the date of ffice.
	Assuming Of	ffice: Date assumed/		•	od covered is/, through of leaving office.
	☐ Candidate: I	Election year	and office sought,	if different than Part 1: _	
4.	Schedule Su	Immary schedules or "None."	► Tota	al number of pages	including this cover page:
	Schedule A-1	I - Investments – schedule attach     Investments – schedule attach     Real Property – schedule attach	ed ed	Schedule C - Incol	me, Loans, & Business Positions – schedule attached me – Gifts – schedule attached me – Gifts – Travel Payments – schedule attached
		☐ No	-or- ne - No reportable inte	rests on any schedule	
5.	V		-		
	herein and in any	attached schedules is true and c	omplete. I ackn		
	•	enalty of perjury under the laws	•		
	Date Signed	4/1/20/3 (month, day, year)			

# SCHEDULE A-1 Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Raquel Monica Garcia

NAME OF BUSINESS ENTITY EVOQ Properties / formerly MMPI Inc.	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
land owner / real estate development	
FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000
NATURE OF INVESTMENT  Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE: /
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT
Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	Stock Other (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
Comments:	

### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

, =	CALIFORNIA FORM	
	Name	OMMISSION

NAME OF SOURCE OF INCOME  CVS Caremark Corporation	NAME OF SOURCE OF INCOME	
ADDRESS (Business Address Acceptable) One CVS Drive, Woonsocket, RI 02895	ADDRESS (Business Address Accep	table)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Commercial Retailer	BUSINESS ACTIVITY, IF ANY, OF S	OURCE
YOUR BUSINESS POSITION Consultant / Government & Community Relations	YOUR BUSINESS POSITION	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED	
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000\$1,0	001 - \$10,000
<b>☑</b> \$10,001 - \$100,000 ☐ OVER \$100,000	\$10,001 - \$100,000 OVE	ER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCO	OME WAS RECEIVED
✓ Salary	Salary Spouse's or registe	ered domestic partner's income
Loan repayment Partnership	Loan repayment Partner	ship
	Colo of	
Sale of(Real property, car, boat, etc.)	Sale of(Real p.	roperty, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Incor	me, list each source of \$10,000 or more
Other(Describe)	Other	(Describe)
(Describe)		(Dodding)
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	IOD	
* You are not required to report loans from commercial le retail installment or credit card transaction, made in the members of the public without regard to your official sta regular course of business must be disclosed as follow	lender's regular course of busin tus. Personal loans and loans	ness on terms available to
NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
	%	
ADDRESS (Business Address Acceptable)	CEOUDITY FOR LOAM	
	SECURITY FOR LOAN  None  Personal re	esidence
BUSINESS ACTIVITY, IF ANY, OF LENDER		33/33/100
	Real Property	Street address
HIGHEST BALANCE DURING REPORTING PERIOD		2 301 000.000
\$500 - \$1,000		City
<b>\$1,001 - \$10,000</b>	Guarantor	
<u>\$10,001 - \$100,000</u>	U Guarantoi	
OVER \$100,000	Other	
OVER \$100,000	Other	(Describe)
OVER \$100,000	Other	(Describe)

## SCHEDULE D Income – Gifts

Name

Raquel Monica Garcia

AME OF SOURCE (Not an Acronym) Vaste Management		► NAME OF SOURCE (Not an Acronym) Olivarez Madruga P.C.		
ADDRESS (Business Address Acceptable 13940 Live Oak Avenue, Balo		ADDRESS (Business Address Acceptable) 1100 S. Flower Street, Suite 220 Los Angeles CA		
BUSINESS ACTIVITY, IF ANY, OF SOURCE Waste Hauler		BUSINESS ACTIVITY, IF ANY, OF SOURCE Law Firm		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	
02 03 12 70.00	Dinner	05 18 12 70.00	Dinner	
02 03 12 75.00	Tour _	\$		
04 26 12 70 .00	Dinner			
NAME OF SOURCE (Not an Acronym) Waste Management		► NAME OF SOURCE (Not an Acronym) Clear Channel Communication	ons	
ADDRESS (Business Address Acceptable 13940 Live Oak Avenue, Balo		ADDRESS (Business Address Acceptable) 19320 Harborgate Way, Torrance CA		
BUSINESS ACTIVITY, IF ANY, OF SOUR Waste Hauler	RCE	BUSINESS ACTIVITY, IF ANY, OF SOUR Global Media Entertainment		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	
08 09 12 50.00	Dinner	09 27 12 70.00	Dinner	
09 06 12 70.00	Dinner	\$	Market	
11 08 12 50.00	Dinner			
NAME OF SOURCE (Not an Acronym) Afriat Consulting		➤ NAME OF SOURCE (Not an Acronym) Southland Transit		
ADDRESS (Business Address Acceptable 4107 W. Magnolia Blvd, Burb		ADDRESS (Business Address Acceptable) 14913 Ramona Blvd, Baldwin Park CA BUSINESS ACTIVITY, IF ANY, OF SOURCE Transportation Services		
BUSINESS ACTIVITY, IF ANY, OF SOUR Government Relations Consi				
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	
10 11 12 70.00	Dinner	10 25 12 70.00	Dinner	
12 20 12 70.00	Dinner	\$		
		/ _ / _ s		

# SCHEDULE D Income – Gifts

Raquel Monica Garcia

► NAME OF SOURCE (Not an Acronym)  Ken Spiker and Associates	► NAME OF SOURCE (Not an Acronym)		
ADDRESS (Business Address Acceptable) 1100 S. Flower St, Suite 3300 Los Angeles CA	ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE		
BUSINESS ACTIVITY, IF ANY, OF SOURCE Government Consultant			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  09 18 12 70.00 Dinner	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
	\$		
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
\$	\$		
\$	\$		
	\$		
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
\$	\$		
\$	\$		
\$	\$		
Comments:			